ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

I, PCA	PCA, hereby request station time as follows: See Order for proposed					
schedule and charges. See Invoice for actual schedule and charges.						
Check one:						
(1) a legally qualified candidate issue of public importance (e.g., subject of controversy or discu	relating to any political matter of national e for federal office; (2) an election to federa , health care legislation, IRS tax code, etc.); o ssion at the national level. message relating to any political matter of	l office; (3) a national legislative r (4) a political issue that is the				
only to a state or local issue).						
ALL QUE	STIONS/BLOCKS MUST BE CON	MPLETED				
Station time requested by: Alliance for P	Patient Access					
Agency name: PCA						
Address: 11 E 44th St, NY, NY 10017						
Contact: Katie Cunningham	Phone number: 6464435076 Email: katie@pcanyc.com					
Name of advertiser/sponsor (list entity's full legal name as disclosed to the Federal Election Commission [for federal committees] with no acronyms; name must match the sponsorship ID in ad):						
Name: Alliance for Patient Access						
Address: 2020 K St. NW Suite 205, Washington DC						
Contact:	Phone number: 202-951-7097 Email: info@allianceforpatientaccess.org					
Station is authorized to announce the t	ime as paid for by such person or entity.					
List ALL chief executive officers, members of the executive committee and the board of directors or other governing group(s) of the advertiser/sponsor (Use separate page if necessary.): Colleen Evans - Treasurer						
By signing below, advertiser/sponsor represents that those listed above are the only executive officers, members of the executive committee and board of directors or other governing group(s).						
If ad refers to a federal candidate(s) or	federal election, list ALL of the following	. N/A				
Name(s) of every candidate referred to:						
Office(s) sought by such candidate(s) (n	o acronyms or abbreviations):					
Date of election:						
Clearly identify EVERY political matter ad (no acronyms); use separate page if	of national importance referred to in the necessary:	N/A				

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

vertiser/Sponsor	Statio	Station Representative				
nature: Phil Cunningham	Signat	Signature: /. '-				
ne: Phil Cunningham	Name:	// 5/1/13				
e of Request to Purchase Ad Time: 05/1	1/2022 Date o	Date of Station Agreement to Sell Time: 5/11/22				
TO BE COMPLETED BY STATION ONLY						
submitted to station? Yes	No Date a	ad received:				
Note: Must have separate PB-19 forms for each version of the ad (i.e., for every ad with differing copy).						
If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.						
Disposition: Accepted Accepted IN PART (e.g., ad not received to determine content)* Rejected – provide reason: *Upload partially accepted form, then promptly upload updated final form when complete.						
Date and nature of follow-ups, if any:						
tract #: 3540581 Sta	tion Call Letters: ンプルチープソ (WT&	Date Received/Requested:				
1	MANAGEMENT TO SELECT THE SELECT T					
If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided. Disposition: Accepted Accepted IN PART (e.g., ad not received to determine content)* Rejected – provide reason: *Upload partially accepted form, then promptly upload updated final form when complete. Date and nature of follow-ups, if any: Contract #: 3546581 Station Call Letters: WTRF-TV (wT&F) Date Received/Requested: Sfr/2v						

Upload order, this disclosure form and invoice (or traffic system print-out) or other material reflecting this transaction to the OPIF or use this space to document schedule of time purchased, when spots actually aired, the rates charged and the classes of time purchased (including date, time, class of time and reasons for any make-goods or rebates) or attach separately. If station will not upload the actual times spots aired until an invoice is generated, the name of a contact person who can provide that information immediately should be placed in the "Terms and Disclosures" folder in the OPIF.

CONTRACT



WTRF 5000 RIverside Dr Building 5 Suite 200 Irving, TX 75039 (304) 232-7777

And:

Political Communications Advertising Attention: Katie Cunningham 11 E 44th Street Room 301 New York, NY 10017

	Contract / Rev	vision	Alt Order #				
	3540581	1		27782184			
Advertiser			Original Date / Revision				
POL/Alliance for Patient Access			0	5/12/22	/ 05/12/22		
Contract Dates	Estimate #						
05/16/22 - 05/29/22	1394						
Product	•						
Issue							
Order Brand	Billing Cycle	Billing	Cal	<u>endar</u>	Cash/Trade		
	EOM	Broad	cast		Cash		
	Property	Account Executive Katz Washington		xecutive	Sales Office		
	WTRF			nington	Katz/Washingto		
	Special Handling			,			
	Demographic						
	Adults 35+						
	Agy Code	Advertiser Code 289 Advertise		Code	Product 1/2		
					318		
	Agency Ref			Advertiser	r Ref		
	0 1 1						

*Line Ch Start Date End Date Description	Start/End Time	Days Le	Spots/ ength Week	Rate	TypeS	pots	Amount
N 1 WTRF 05/16/22 05/27/22 6:30 AM-7:00 AM <u>Start Date</u> <u>End Date</u> <u>Weekdays</u> <u>Spots/Week</u> Week: 05/16/22 05/22/22 MTWTF 4 Week: 05/23/22 05/29/22 MTWTF 4	6:30 AM-7:00 AM <u>Rate</u> \$200.00 \$200.00		:30		NM	8	\$1,600.00
N 2 WTRF 05/22/22 05/29/22 10:30 AM-11:30 AM Start Date End Date Weekdays Spots/Week Week: 05/16/22 05/22/221 1 Week: 05/23/22 05/29/221 1	10:30 AM-11:30 AN <u>Rate</u> \$175.00 \$175.00		:30		NM	2	\$350.00
N 3 WTRF 05/16/22 05/27/22 7 News @ 6p M-F Start Date End Date Weekdays Spots/Week Week: 05/16/22 05/22/22 MTWTF 3 Week: 05/23/22 05/29/22 MTWTF 3	7 News @ 6p M-F <u>Rate</u> \$600.00 \$600.00		:30		NM	6	\$3,600.00
ET UP THE STATE OF		Totals		90000 · 10000000000000000000000000000000		16	\$5,550.00

Time Period	# of Spots Gross A		Agency Comm.	Net Amount	
04/25/22 -05/29/22	16	\$5,550.00	(\$832.50)	\$4,717.50	
Totals	16	\$5,550.00	(\$832.50)	\$4,717.50	

Signature:

(* Line Transactions: N = New, E = Edited, D = Deleted)

Notwithstanding to whom bills are rendered, advertiser, agency and service, jointly and severally, shall remain obligated to pay to station the amount of any bills rendered by station within the time specified and until payment in full is received by station. Payment by advertiser to agency or to service or payment by agency to service, shall not constitute payment to station. Station will not be bound by conditions. printed or otherwise contracts, insertion orders, copy instructions or any correspondence when such conflict with the above terms and conditions. Two week advance cancellation notice is required unless otherwise specified.